



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Grigori N. Enikolopov and John Mignone

Application No.: 09/444,335

Group: 1632

Filed: November 19, 1999

Examiner: Richard Schnizer

For: Transgenic Mice Expressing Fluorescent Protein in Multipotent Stem and Progenitor Cells

TECH CENTER 1600/2900

JUL 26 2002

RECEIVED

#23 / K.T.
7/26

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Assistant Commissioner for Patents, P.O. Box 2327, Arlington, VA 22202	
on <u>7/18/02</u>	<u>Kathleen Riley</u>
Date	Signature
<u>Kathleen Riley</u>	
Typed or printed name of person signing certificate	

Assistant Commissioner for Patents
 P.O. Box 2327
 Arlington, VA 22202

Sir:

Transmitted herewith is Amendment A for filing in the above-identified application.

[X] Small entity status of this application under 37 C.F.R. 1.9 and 1.27 has been established by a Small Entity Statement previously submitted.

[] A Small Entity Statement to establish small entity status under 37 C.F.R. 1.9 and 1.27 is enclosed.

The fee has been calculated as shown below:

(COL. 1)	(COL. 2)	(COL. 3)	(COL. 4)	(COL. 5)
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA
TOTAL	79	MINUS	* 79	
INDEP	15	MINUS	** 15	
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				

* not fewer than 20
 ** not fewer than 3

SMALL ENTITY	
RATE	ADDIT. FEE
X \$ 9	\$ 0
X \$42	\$ 0
+ \$140	\$

TOTAL = \$ 0

OTHER THAN SMALL ENTITY	
RATE	ADDIT. FEE
X \$18	\$
X \$84	\$
+ \$280	\$

TOTAL = \$ 0

Please charge Deposit Account No. 08-0380 for the following fees:

<input type="checkbox"/>	Petition for [] month Extension of Time	\$	_____
<input type="checkbox"/>	Amendment Fee	\$	_____
<input type="checkbox"/>	Other Fees:		
	_____	\$	_____
	_____	\$	_____
	TOTAL:	\$	<u>0</u>

A check is enclosed in payment of the following fees:

<input checked="" type="checkbox"/>	Petition for four month Extension of Time	\$	<u>720</u>
<input type="checkbox"/>	Amendment Fee	\$	_____
<input checked="" type="checkbox"/>	Other Fees:		
	Request for Continued Examination (RCE)	\$	<u>740</u>
	_____	\$	_____
	TOTAL:	\$	<u>1460</u>

☒ A general authorization is hereby granted to charge Deposit Account No. 08-0380 for any fees required under 37 C.F.R. 1.16 and 1.17 in order to maintain pendency of this application. A copy of this authorization is enclosed for accounting purposes.

Respectfully submitted,

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

By Anabela E. Taylor
Anabela Cristina Taylor
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Concord, Massachusetts 01742-9133

Dated: July 18, 2002